

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Eugenio A. Cefali
Application No. : 08/962,421 Confirmation No.:
Filed : October 31, 1997
For : INTERMEDIATE RELEASE NICOTINIC ACID
COMPOSITIONS FOR TREATING HYPERLIPIDEMIA
WHICH EXHIBIT AN IN VIVO STAIR-STEPPED
ABSORPTION CURVE

Group : 1615
Examiner : James M. Spear

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Hon. Commissioner for Patents
P.O. Box 2327
Arlington, Virginia 22202

Box **ISSUE FEE**

WITHDRAWAL OF SMALL ENTITY STATUS

Sir:

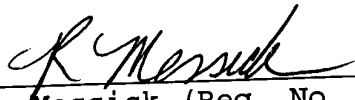
Pursuant to 37 C.F.R. § 1.27(g)(1) and (2), Kos Pharmaceuticals Inc., the assignee in the above-identified application, hereby notifies the United States Patent and Trademark Office that assignee's status has changed and Small Entity status is no longer applicable.

In the accompanying Transmittal letter (submitted in duplicate), assignee authorizes the Director to charge the full amount of \$1,300.00 in payment of the accompanying

issue fee as a large entity, to Deposit Account No. 50-2543
(Kos) .

Respectfully submitted,

Date: 1/15/03



Karen J. Messick (Reg. No. 46,256)
Attorney for Applicant
c/o KOS Pharmaceuticals, Inc.
1001 Brickell Bay Drive
25th Floor
Miami, Florida 33131
Tel.: (305) 523-3643

PART B—ISSUE FEE TRANSMITTAL

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Box ISSUE FEE
Assistant Commissioner for Patent
Washington, D.C. 20231

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Peter Manso (Depositor's name)
Peter Manso (Signature)
Dec. 26, 2000 (Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/962,421	10/21/97	004	SPEAR, J	1615 09/25/00
First Named Applicant	DEFAULT	35 USC 154(b) term ext. =	0 Days.	

TITLE OF INVENTION: INTERMEDIATE RELEASE NICOTINIC ACID COMPOSITIONS FOR TREATING HYPERLIPIDEMIA WHICH EXHIBIT AN IN VIVO STAIR-STEPPED ABSORPTION CURVE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
84092.22	424-464.000	570	UTILITY	NO YES	1300.00 \$605.00	12/24/00

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. *Peter J. Manso*
2. _____
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE *Kos Pharmaceuticals, Inc.*

(B) RESIDENCE (CITY & STATE OR COUNTRY)

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

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(Authorized Signature) *Peter Manso* (Date) *12-26-2000*

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PETER J MANSO
KERMAN, SENTERFITT, EIDSON
LAS OLAS CENTRE, SUITE 950
450 EAST LAS OLAS BOULEVARD
FORT LAUDERDALE FL 33301-2227

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Dec. 26, 2000 (Date)

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First Named Applicant CEFALI, 35 USC 154(b) term ext. = 0 Days.				

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ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1 32892.22	424-464.000	S70	UTILITY	NO YES	\$605.00	12/26/00

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

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1 *Peter J. Manso*

2 _____

3 _____

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(Date)

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